

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
SACRAMENTO, CA 95814

(916) 445-1161

May 6, 1985

CMSP Letter
No. 85-1

TO: ALL COUNTY WELFARE DIRECTORS

CMSP IMPLEMENTATION OF THE DEFICIT REDUCTION ACT OF 1984 (DEFRA) AND PUBLIC LAW 98-378.

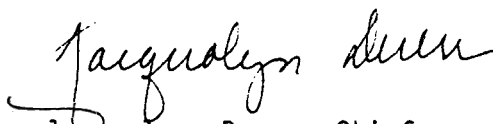
This letter provides you with County Medical Services Program (CMSP) instructions for relevant DEFRA and Public Law 98-378 changes. For CMSP eligibility determinations, counties should apply all the changes listed below effective May 1, 1985. For the CMSP, counties should not follow the effective dates, some of which are retroactive, listed in Medi-Cal All County Welfare Directors Letter No. 85-32 (April 29, 1985). The relevant changes are being included in the CMSP manual revision currently underway, and will be sent to counties in June, 1985. In the interim, counties should refer to the Medi-Cal All County Welfare Directors Letter No. 85-32 for exact wording of the changes. The changes applicable to CMSP include:

<u>Medi-Cal Regulation Title 22, CAC</u>	<u>CMSP Manual Section</u>	<u>Description</u>
1. 50379	0379	Makes nine month continuing Medi-Cal eligibles ineligible members of the CFBU.
2. 50420	0420	Increases property limits (copy attached).
3. 50455	0455	Exempts retroactive SSI/Title II lump sum payments from consideration as property for 6 months after the month of receipt.
4. 50503	0503	Specifies that the actual Earned Income Tax Credit (EITC) payment is considered as earned income.
5. 50507	0507	Specifies that Non-Exempt child/spousal support is unearned income.

<u>Medi-Cal Regulation Title 22, CAC</u>	<u>CMSP Manual Section</u>	<u>Description</u>
6. 50524	0524	Exempts the first \$50 of child/ spousal support from consideration as income.
7 50553.1	0551.1	Provides for a \$75 work expenses disregard in all cases with earned income, regardless of full time/ part time employment status.
8. 50551.1	0553.3	Specifies that a \$30 exemption of earned income continue for 8 consec- utive months after the \$30 + one third deduction expires.
9. 50657	0657	Includes reference to nine months con- tinuing eligibles in share of cost section. Specifies that health care services received by such eligibles may not be used to meet the share of cost of others.

If you have any question regarding these changes, please contact Albert Cooper of my staff at (916) 323-0503.

Sincerely,



Jacquelyn, Duerr, Chief
County Medical Services Program
Office of County Health Services

Attachment

OCHS-2839

4/3/85

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50420. Property Limit.

(a) The property reserve shall not exceed the following limits.

Number of Persons Whose Property is Considered.		Property Limit <u>1985</u>	Property Limit <u>1986</u>	Property Limit <u>1987</u>	Property Limit <u>1988</u>	Property Limit <u>1989</u>
1 person	\$1,500	<u>\$1,600</u>	<u>\$1,700</u>	<u>\$1,800</u>	<u>\$1,900</u>	<u>\$2,000</u>
2 persons	\$2,250	<u>2,400</u>	<u>2,550</u>	<u>2,700</u>	<u>2,850</u>	<u>3,000</u>
3 persons	\$2,300	<u>2,550</u>	<u>2,700</u>	<u>2,850</u>	<u>3,000</u>	<u>3,150</u>
4 persons	\$2,400	<u>2,700</u>	<u>2,850</u>	<u>3,000</u>	<u>3,150</u>	<u>3,300</u>
5 persons	\$2,500	<u>2,850</u>	<u>3,000</u>	<u>3,150</u>	<u>3,300</u>	<u>3,450</u>
6 persons	\$2,600	<u>3,000</u>	<u>3,150</u>	<u>3,300</u>	<u>3,450</u>	<u>3,600</u>
7 persons	\$2,700	<u>3,150</u>	<u>3,300</u>	<u>3,450</u>	<u>3,600</u>	<u>3,750</u>
8 persons	\$2,800	<u>3,300</u>	<u>3,450</u>	<u>3,600</u>	<u>3,750</u>	<u>3,900</u>
9 persons	\$2,900	<u>3,450</u>	<u>3,600</u>	<u>3,750</u>	<u>3,900</u>	<u>4,050</u>
10 or more persons	\$3,000	<u>3,600</u>	<u>3,750</u>	<u>3,900</u>	<u>4,050</u>	<u>4,200</u>